



Applicant Name:

Mailing Address:  City:  State:  Zip:

Physical Address:  City:  State:  Zip:

Applicant's Website Address:  Contact Name/Title:

Contact Phone Number:  Contact's Email:

Requirements to accompany submission:  
ACORD application; 3-5 year loss runs; Photos of common areas.

## General Information

1. Year business started:

2. Total number of lots:

3. Number of lots sold:

4. What is the average home value?

5. Is the developer involved in the association's board? ☐ Yes ☐ No  
If yes, has control of the board been turned over to the association? ☐ Yes ☐ No

6. Are all homes single-family, detached homes? ☐ Yes ☐ No

7. Has management of the association changed in the last 3 years? ☐ Yes ☐ No

8. Please describe any losses the association has had in the past 5 years:

9. Current carrier:

10. Current premium:

## Amenities Information

1. Common areas on premises (check if applicable and confirm number of each):

|                                                                        |                                                                                                                    |
|------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Club House (total area): <input type="text"/> | <input type="checkbox"/> Docks/Slips/Piers: <input type="text"/>                                                   |
| <input type="checkbox"/> Indoor or Outdoor Pool: <input type="text"/>  | <input type="checkbox"/> Lakes or Ponds: <input type="text"/>                                                      |
| <input type="checkbox"/> Vacant Land (acres): <input type="text"/>     | <input type="checkbox"/> Beaches: <input type="text"/>                                                             |
| <input type="checkbox"/> Parks or Playgrounds: <input type="text"/>    | <input type="checkbox"/> Sports Court (types): <input type="text"/>                                                |
| <input type="checkbox"/> Fitness Center: <input type="text"/>          | If yes, is waiver signed by all members (provide a copy)? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <input type="checkbox"/> Other: <input type="text"/>                   |                                                                                                                    |

2. Does the association sponsor any events? ☐ Yes ☐ No  
If yes, please describe:

## Liability Information

1. Does the association have a pool? ☐ Yes ☐ No
 

If outdoor, is the pool area fenced with a self-locking gate? ☐ Yes ☐ No

If indoor, is the pool located in a locked building? ☐ Yes ☐ No

Is there a lifeguard on duty? ☐ Yes ☐ No

If not, are there "swim at your own risk" signs posted? ☐ Yes ☐ No

Is the pool equipped with visible life safety equipment? ☐ Yes ☐ No

What is the depth of the pool?  ft

Are clear depth markers, pool hours, warning signs and rules posted? ☐ Yes ☐ No

Are there diving boards, diving platforms or water slides present? ☐ Yes ☐ No

If yes, what is the height of the boards and/or slides (please provide photos):  ft

Is use of the pool restricted to association members only? ☐ Yes ☐ No

Are pools compliant with the Federal Virginia Graeme Baker Pool and Spa Safety Act? ☐ Yes ☐ No
2. Does the association have any lakes, ponds, or beaches? ☐ Yes ☐ No
 

Is swimming permitted? ☐ Yes ☐ No

Is the swimming area roped off? ☐ Yes ☐ No

Is there a lifeguard on duty? ☐ Yes ☐ No

If not, are there "swim at your own risk" signs posted? ☐ Yes ☐ No

Are there any docks or swim rafts present? ☐ Yes ☐ No

Are no diving signs, warning signs and rules posted? ☐ Yes ☐ No

Is use of the lake, pond or beach restricted to association members only? ☐ Yes ☐ No

Is boating permitted? ☐ Yes ☐ No

Is there a dam present? ☐ Yes ☐ No
3. Does the association sponsor any athletic teams or host any sporting competitions? ☐ Yes ☐ No
 

If yes, please describe:

## Property Information ☐ N/A

1. Do you have commercial cooking facilities? ☐ Yes ☐ No
2. If yes, is the cooking surface covered by a UL300 extinguishing system? ☐ Yes ☐ No
3. For property insurance, we require that the system have a quarterly or semi-annual cleaning and servicing contract. Are contracts for this in place? ☐ Yes ☐ No

## Association Information

1. Is membership in the association voluntary? ☐ Yes ☐ No
2. Is this a gated community or gated property? ☐ Yes ☐ No
3. Is the association responsible for maintenance of any roadways? ☐ Yes ☐ No
 

If yes, what is the mileage of the roadway?  mi.

4. Is the association responsible for its own water supply, or water treatment or sewage facility? ☐ Yes ☐ No
5. Is the association responsible for its own tax collection? ☐ Yes ☐ No
6. Are certificates of insurance received for all outside contractors? ☐ Yes ☐ No
- Liability insurance verified for: ☐ Landscaping ☐ Maintenance ☐ Pool Service ☐ Snow Removal
7. Are security services present? ☐ Yes ☐ No ☐ Armed ☐ Unarmed
- Are the guards: ☐ Employees ☐ Off Duty Police ☐ Independent Contractors
- Are guard dogs used? ☐ Yes ☐ No

### I DECLARE THAT THE STATEMENTS MADE IN THIS SUPPLEMENTAL ARE COMPLETE AND TRUE

Any person who, with the intent to defraud or knowing that he or she is facilitating a fraud against an insurer, submits a supplemental or files a claim containing a false or deceptive statement may be guilty of insurance fraud and subject to criminal and civil penalties. Any changes in your operation must be reported to your agent. (Not applicable in MN, NY, OR, or WA)

**Minnesota:** A person who submits an application or files a claim with intent to defraud or helps commit a fraud against an insurer is guilty of a crime.

**New York:** Any person who knowingly and with intent to defraud any insurance company or other person files an application for commercial insurance or a statement of claim for any commercial or personal insurance benefits containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, and any person who, in connection with such application or claim, knowingly makes or knowingly assists, abets, solicits or conspires with another to make false report of the theft, destruction, damage or conversion of any motor vehicle to a law enforcement agency, the department of motor vehicles or an insurance company commits a fraudulent insurance act, which is a crime, and shall be subject to a civil penalty not to exceed five thousand dollars and the value of the subject motor vehicle or state claim for each violation.

**Oregon:** Any person who knowingly and with intent to defraud or solicit another to defraud the insurer by submitting an application containing a false statement as to any material fact may be violating state law.

**Washington:** It is a crime to knowingly provide false, incomplete, or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines, and denial of insurance benefits.

Insured's Signature:  Date:

Agents's Signature:  Date:

PRINT

Please submit completed application to your Independent Insurance Agent in electronic or printed format.

**Western National Insurance Group**  
**Central Region**  
 4700 West 77th Street, Edina, MN, 55435  
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